



**PATENT APPLICATION**

**RESPONSE UNDER 37 CFR §1.114  
TECHNOLOGY CENTER ART UNIT 2142**

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of

Ryu INADA et al.

Group Art Unit: 2142

Application No.: 09/987,418

Examiner: T. Vu

Filed: November 14, 2001

Docket No.: 111121

For: METHOD AND APPARATUS FOR PROCESSING SUBJECT NAME INCLUDED IN  
PERSONAL CERTIFICATE

**AMENDMENT SUBMISSION UNDER 37 CFR §1.114**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In further reply to the January 10, 2005 Final Office Action and in substitution of the  
May 10, 2005 Amendment After Final Rejection and in reply to the May 31, 2005 Advisory  
Action, please consider the following:

**Amendments to the Claims** as reflected in the listing of claims; and

**Remarks.**

OLIFF & BERRIDGE, PLC  
Telephone: (703) 836-6400  
Facsimile: (703) 836-2787



**PATENT APPLICATION**

Attorney Docket No.: 111121

CUSTOMER NUMBER 25944

**AMENDMENT TRANSMITTAL**

In re the Application of

Ryu INADA et al.

Group Art Unit: 2142

Application No.: 09/987,418

Examiner: T. VU

Filed: November 14, 2001

For: METHOD AND APPARATUS FOR PROCESSING SUBJECT NAME INCLUDED IN PERSONAL CERTIFICATE

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

- ☐ Entitlement to small entity status is hereby asserted.  
☐ Small entity status of this application has been established.

Any additional claim fees have been calculated as shown below:

	(Column 1)	(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA
TOTAL CLAIMS	*22 MINUS	**20	=2
INDEP CLAIMS	*9 MINUS	***9	=
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM			

SMALL ENTITY	
RATE	ADD'L FEE
x 25	\$
x 100	\$
+ 180	\$
	\$

OTHER THAN A SMALL ENTITY	
RATE	ADD'L FEE
x 50	\$ 100
x 200	\$
+ 360	\$
	\$ 100

OR

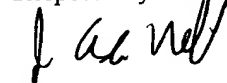
OR

- \* If the entry in Column 1 is less than the entry in Column 2, write "0" in Column 3.  
\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.  
\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" in this space (Total or Independent) is the highest number found from the equivalent box in Column 1 of a prior Amendment or the number of claims originally filed.

- ☒ Check No. 167613 in the amount of \$100 is attached. The Commissioner is hereby authorized to charge any other fees that may be required to complete this filing, or to credit any overpayment, to Deposit Account No. 15-0461. Two duplicate copies of this sheet are attached.

Respectfully submitted,

  
James A. Oliff  
Registration No. 27,075

J. Adam Neff  
Registration No. 41,218

JAO:JAN/tbh

Date: June 10, 2005